

GSA TAX LETTER

INSTRUCTIONS: Attach copy of A45 RPO and OPT Coupon (if available) and mail to Austin Finance Center, 1615 East Woodward Street, Austin, TX 78772

PRIVACY ACT STATEMENT: The information requested on this form is solicited under Title 38, United States Code, and will authorize release of the information you specified. The information may also be disclosed outside VA, as permitted by law, to include disclosures as stated in the "Notices of Systems of VA Records" published in the Federal Register in accordance with the Privacy Act of 1974. The information requested is necessary to ensure that the statutory requirements of the Privacy Act of 1974 and VA's confidentiality statute are met.

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STATION NUMBER		EMPLOYEE SOCIAL SECURITY NUMBER			NAME OF EMPLOYEE						
PAY BASIS	TYPE APPO	<u>I</u> INTMENT	DATE OF BIRTH	F BIRTH	FTE EQUIVALENT	COST CENTER		SEPARATION DAY NUMBER			
R1, R5 (ACTIVE EMPLOYEE)(GSA Code no longer in Master Record)					R1, R3, R4 (SEPARATED EMPLOYEE)						
ITEM FIELD		DECREAS	E INCR	REASE	DUTY BASIS PAY PLAN		Y PLAN		NORMAL HOURS		
GSA CODE					SUB ACCOUNT FUND CONT		ROL POINT				
GROSS WAGES					ITEM FIELD			DEC	DECREASE INCREASE		
TAX AMOUNT					GSA TAX CODE						
WAGE INFORMATION AMOUNT					GROSS WAGES						
OPT TAX CODE					TAX AMOUNT						
OPT TAX AMOUNT					WAGE INFORMATION AMOUNT		MOUNT				
93, 94 (ACTIVE	EMPLOYE	E)(GSA Code ii	n Master Record))							
ITEM FIELD		DECREAS	E INCR	REASE							
GSA TAX CODE					_						
GROSS WAGES					-						
TAX AMOUNT					AUSTIN USE ONLY						
WAGE INFORMATION AMOUNT					PAY PERIOD PROCESSED						
COMMENTS, SPECIAL CIRC		S, OR INSTRUC	TIONS								
SIGNATURE OF AUTHORIZE	ED OFFICIAL						DATE				

VA FORM **0747**